

J1046 U.S. PTO  
09/852743



7/21/01  
5/25/01

ISSUE SLIP STAFF AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Wille</i>		<i>05-14-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>T.A.</i>	<i>JCH</i>	
RESPONSE FORMALITY REVIEW	<i>W/S</i>	<i>5-25-01</i>	

*some  
embodiments  
class. 901*

INDEX OF CLAIMS

- ✓ ..... Rejected
- = ..... Allowed
- (Through numeral) ... Canceled
- ÷ ..... Restricted

Claim	Date
Final	
Original	
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If more than 150 claims or 10 actions  
staple additional sheet here

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